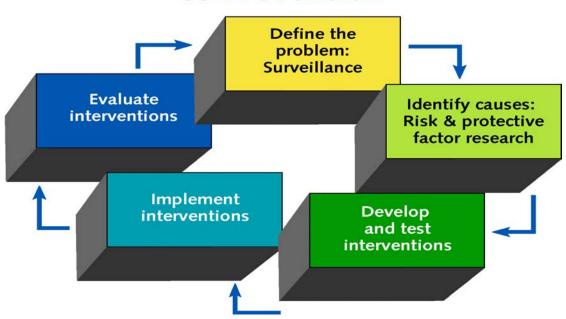


Suicide Prevention: The Public Health Approach

The National Strategy for Suicide Prevention advocates a public health approach to suicide prevention. Public health is the science and art of promoting health, preventing disease, and prolonging life through the organized efforts of society.

The public health approach is widely regarded as the approach that is mostly likely to produce significant and sustained reductions in suicide. It uses five basic evidence-based¹ steps in a systematic way. These steps are applicable to any health problem that threatens substantial portions of a group or population.

The Public Health Approach to Prevention



The steps may be sequential, or overlap. For example, the techniques used to define the problem, such as determining the frequency with which a particular problem arises in a community, may be used in assessing the overall effectiveness of prevention programs. Evaluating interventions must be built into implementation, and information gained from evaluations should guide the development of new interventions.

This document has been published by the Suicide Prevention Resource Center at EDC as a collection of resources, promising initiatives and other helpful information on the subject of suicide prevention. It is the reader's sole responsibility to determine whether any of the information contained in these materials is useful to them. This material is based upon work supported by the Department of Health and Human Services, Substance Abuse and Mental Health Services Administration under grant No. 1 U79 SM55029-01. Any opinions, findings and conclusions or recommendations expressed in this material are those of the author(s) and do not necessarily reflect the views of the Department of Health and Human Services, Substance Abuse and Mental Health Services Administration.

¹ Evidence-based: Programs that have undergone scientific evaluation and have proven to be effective.



SAMHSA

Suicide Prevention: The Public Health Approach

Applying the Public Health Approach to Suicide Prevention

1. Define the problem: Surveillance²

Suicide Surveillance – Collecting information about the rates of suicidal behaviors³. This can include the collection of information about individuals who attempt or die by suicide, their circumstances, and the effects on others. Data on suicidal behavior is available from the Centers for Disease Control and Prevention at http://www.cdc.gov/nchs/fastats/suicide.htm. (See the SPRC fact sheet, "Sources of Data on Suicidal Behavior," for sources of data on your state, territory or community.)

2. Identify causes

Suicide is best understood as a very complex human behavior, with no single determining cause. The factors that affect the likelihood of a person attempting or completing suicide are known as $risk^4$ or $protective^5$ factors, depending on whether they raise or lower the likelihood of suicidal behavior. Risk factors include mental illness and loss of a loved one. Protective factors include support networks and access to mental health care.

While people who attempt or complete suicide typically experience a combination of risk factors, there is often one precipitating factor that leads the person to attempt suicide. However, a person with many risk factors may not attempt to commit suicide if his or her risk factors are balanced by protective factors.

3. Develop and test interventions

Interventions might attempt to influence some combination of psychological state, physical environment, and cultural conditions. It is important to test intervention methods to ensure that they are safe, ethical, and feasible. Interventions that are successful in one setting may not be universally applicable. Comprehensive suicide prevention programs are believed to have a greater likelihood of reducing the suicide rate than are interventions that address only one risk or protective factor. Collaboration between community leaders and coalitions that cut across traditionally separate sectors can increase effectiveness.

Formative evaluation, including pre-testing, permits necessary revisions before the full effort goes forward. Its purpose is to maximize success of the program prior to implementation. Thorough consideration needs to be given to the possibility of increase in demand for services that do not exist in the community.

⁵ Protective factors that make it *less* likely that individuals will develop a disorder; they may include biological, psychological, or social factors in the individual, family, and environment.



² Surveillance: The ongoing, systematic collection, analysis, and interpretation of health data with timely dissemination of findings.

³ Suicidal behaviors: A spectrum of activities related to thoughts and behaviors that include suicidal thinking, suicide attempts, and completed suicide.

⁴ Risk factors make it *more* likely that individuals will develop a disorder; they may include biological, psychological, or social factors in the individual, family, and environment.

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4. Implement interventions

Fidelity, which means implementing the entire program as it was designed and tested, is of key importance in the implementation phase. The principles of the program should remain intact even as minor adaptations for community or cultural needs are made. Consistency of design is the primary means of ensuring success as programs are disseminated.

Despite having a sound implementation plan, unanticipated problems often arise. Evaluation must be incorporated into a project right from its planning stages. (Information on incorporating evaluation into program planning can be found in <u>Suicide Prevention: Prevention Effectiveness</u> and Evaluation by SPAN USA, Inc. (2001).

An important consideration during the implementation phase is to facilitate open communication between the funder, project staff, project partners, and community to ensure that the project addresses everyone's real needs.

5. Evaluate effectiveness

Evaluation involves setting realistic goals and objectives, and must be incorporated into a program from its inception. (Information on incorporating evaluation into program planning can be found in <u>Suicide Prevention: Prevention Effectiveness and Evaluation</u> by SPAN USA, Inc. (2001). Objectives must be specific, measurable, attainable, relevant, and time-based. An ideal, evidence-based intervention is one that has been evaluated and found to be safe, ethical, and feasible, as well as effective. Determination of cost effectiveness is another important aspect of evaluation.

Most interventions that are presumed to prevent suicide, including some that have been widely implemented, have not yet been evaluated. Evaluation can help determine for whom a particular suicide prevention strategy is best fitted or how it should be modified in order to achieve maximum effectiveness. Evaluation does not need to be expensive or require expertise in biostatistics. As seen in the previous steps, evaluation can easily be integrated into the different phases of a project, making the project an evidence-based practice.

References:

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